

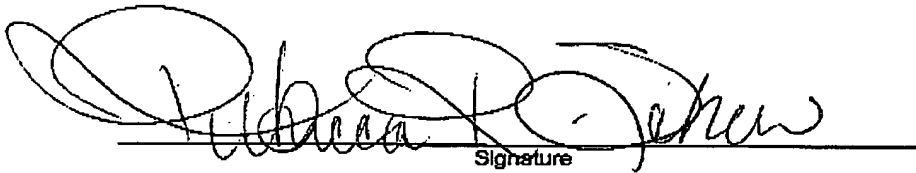
Application No.: 09/976,302

Attorney Docket No.: 10007788-1

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to Examiner Peter J. Smith via the USPTO central facsimile number, (571) 273-8300.

on August 31, 2005
Date



Signature

Rebecca R. Schow

Typed or printed name of person signing Certificate

Transmitted, herewith, are the following documents:

1. Transmittal Letter for Response/Amendment (1 page)
2. Duplicate Copy of Transmittal Letter for Response/Amendment (1 page)
3. Certificate of Transmission (1 page)
4. Request for Continued Examination 37 CFR 1.114 (2 page)
5. Duplicate Copy of Request for Continued Examination 37 CFR 1.114 (2 page)
6. Petition for Extension of Time (1 page)
7. Duplicate Copy of Petition for Extension of Time (1 page)
8. Amendment With Request for Continued Examination (13 pages)

HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P. O. Box 272400
Fort Collins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO. 10007788-1

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): John David Laughlin

Confirmation No.: 1847

Application No.: 09/976,302

Examiner: SMITH, Peter J.

Filing Date: Oct. 11, 2001

Group Art Unit: 2176

Title: Method and System for Defining Separate Print Quality Within a Print Job

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AUG 31 2005

Mail Stop RCE
Commissioner For Patents
PO Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

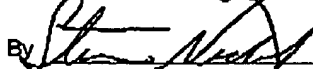
- (X) Response/Amendment (X) Petition to extend time to respond
(X) New fee as calculated below () Supplemental Declaration
() No additional fee
(X) Other: Request for Continued Examination (RCE) 37 CFR 1.114 (fee \$ _____)

CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	20	MINUS	31	= 0	X \$50	\$ 0
INDEP. CLAIMS	6	MINUS	4	= 2	X \$200	\$ 400
[] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$360	\$ 0
EXTENSION FEE	1ST MONTH \$120.00	2ND MONTH \$450.00	3RD MONTH \$1020.00	4TH MONTH \$1590.00		\$ 0
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 400

Charge \$ 400 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

John David Laughlin

By 

Steven L. Nichols

Attorney/Agent for Applicant(s)
Reg. No. 40,326

Date: August 31, 2005

Rev 12/04 (TrnAmdFax)

Telephone No.: (801) 572-8066

- Attach as First Page to Transmitted Papers -